

## **Contractor Application Form – Facilities Modification Projects**

### **Electronic Submission of Contractors Application is required.**

The purpose of this application is to establish a list of contractors' who are available to provide contracting services for various trades for Fairfax County Public Schools (FCPS)- Facilities Modification projects.

The application to be completed is an Adobe Reader fillable form. Complete the form in the following pages to be submitted via e-mail and attach the three required documents in item #13 to complete the application. If a current version of Adobe Reader is needed for this application.

Before starting this application, please print this instruction page (page one) for reference while completing the application.

**Instructions** to complete the Contractor Application Form for November 2019-2022:

- Enter the required data and information into the Adobe Reader fillable form on the following pages. Be sure to save this PDF file to your computer for future reference.
- Complete the Adobe Reader fillable form portion of the application and e-mail this PDF form along with the three required documents in item #13 as attachments to [facilitiesimprovements@fcps.edu](mailto:facilitiesimprovements@fcps.edu).
  1. Complete the Adobe Reader fillable form. Save on to your computer.
  2. Click on the e-mail envelope icon in the Adobe Reader toolbar (envelope picture), when the window opens, click send as copy.
  3. Insert the three required documents (item 13) as additional attachments to this e-mail.
  4. Enter your Contractor name in the Subject line of the e-mail.
  5. Insert the e-mail address [facilitiesimprovements@fcps.edu](mailto:facilitiesimprovements@fcps.edu) and click send.

**CONTRACTOR APPLICATION FORM  
FACILITIES MODIFICATION PROJECTS  
Design and Construction Services**

Contractors shall submit one electronically signed completed application and include required documents in item #13 A, B, and C.

1. Company Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. City/State/Zip Code: \_\_\_\_\_
4. Point of Contact: \_\_\_\_\_
5. Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_
6. Email Address: \_\_\_\_\_
7. State Corporation Commission Corporate Identification number (if applicable) # \_\_\_\_\_
8. Fairfax County Business, Occupational, and Professional License (BPOL) # \_\_\_\_\_  
\_\_\_\_\_
9. State of Virginia Contractors License with classification(s). The license must show the three (3) letter designation. List designated employees, qualified employees, or responsible management, current contractor's licenses, certifications, or registration numbers from any jurisdiction including Virginia who will be assigned to Fairfax County Public Schools. Please use the three-letter identification code for license classifications and special designations provided on the next page or in the link below for the Commonwealth of Virginia Board for Contractors Regulations (i.e. CBC-commercial building, CIC- commercial improvement, ELE-electrical, PLB-plumbing).  
<http://www.dpor.virginia.gov/uploadedFiles/MainSite/Content/Boards/Contractors/A501-27LIC.pdf>

3-Letter Code	Name	License, Certification or Registration No.	Exp. Date	License Classification A or B
ELE	John Doe (Example)	XXXXXXXXXXXX	XX/XX/XX	A or B

\* Home Improvement Contractor (HIC) and Residential Building Contractor (RBC) will not be accepted to do work within Fairfax County Public Schools.

### 3-Letter Codes for License Classifications and Specialty Designations

Below is a list of the licenses classifications and specialty designations issued by the Virginia Board for Contractors and the three-letter code to be entered when completing the Qualified Individual table on the previous page. At least one code must be chosen. A definition of the type of work that each of these classifications and designations may perform is available in the Board of Contractors Regulations obtained by clicking on the link on the previous page. A license may have more than one classification or specialty designation.

#### License Classifications and Specialty Designations

<b><u>Applicants must hold a Certification for the following classification and/or specialty:</u></b>					
BEC	Blast/explosive	MHC	Manufactured home contracting	RMC	Radon mitigation
SPR	Fire sprinkler				
<b><u>Applicants must hold a valid license issued from DPOR for the following designations:</u></b>					
ASB	Asbestos	GFC	Gas fitting	PLB	Plumbing
ASC	Accessibility services	HVA	HVAC	SDS	Sewage disposal system
ASL	Accessibility services with LULA	LAC	Lead abatement	WWP	Water well/pump
ELE	Electrical	LPG	Liquefied petroleum gas		
EEC	Elevator/escalator	NGF	Natural gas fitting provider		
<b><u>*Applicants are required to be pre-approved and pass an examination for the following classification and/or specialty:</u></b>					
AES	Alternative energy systems	FAS	Fire alarm systems	BRK	Masonry
PAV	Asphalt paving & seal coating	FSP	Fire suppression	PTC	Painting & wall covering
BSC	Billboard/sign	FLR	Flooring & floor covering contracting	RFC	Recreational facility
CBC	Commercial building	FRM	Framing subcontractor	REF	Refrigeration
CIC	Commercial improvement	GLZ	Glass & glazing contracting	ROC	Roofing
CEM	Concrete	H/H	Highway/heavy	STL	Steel erection contracting
DRY	Drywall company	IBC	Industrial building contracting	POL	Swimming pool construction
ESC	Electronic/communications service	INS	Insulation & weather stripping contracting	TMC	Tile, marble, ceramic & terrazzo contracting
EMW	Environmental monitoring well				
ENV	Environmental specialties	ISC	Landscape irrigation	UUC	Underground utility & excavating contracting
EMC	Equipment/machinery	LSC	Landscape services		
FIC	Farm improvement	MCC	Marine facility	VCC	Vessel construction
FIN	Finish carpentry contracting			VCC	Vessel construction

**10.** All contractors and businesses are required to submit three (3) references of projects completed in the past year in occupied buildings, preferably schools, listing the type of project/work, the owner, contact name, telephone number and the value of the project/work. **Only one reference can be FCPS personnel.**

1. Type of Project/work: \_\_\_\_\_ Owner: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Value of Project/Work: \_\_\_\_\_

2. Type of Project/work: \_\_\_\_\_ Owner: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Value of Project/Work: \_\_\_\_\_

3. Type of Project/work: \_\_\_\_\_ Owner: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Value of Project/Work: \_\_\_\_\_

11. Virginia Department of Small Business and Supplier Diversity (SWaM) Certification # \_\_\_\_\_

SWaM Classification: \_\_\_\_\_ Small Business \_\_\_\_\_ Woman-owned Business \_\_\_\_\_ Minority Business

12. Facilities Modification Projects may include, but not be limited to the following Pricing Schedule Form based on Trades. All pricing shall remain in force for a period of two (2) years from date of acceptance. Hourly and daily rates for Contractor Owned Equipment must be submitted on Pricing Schedule Form page 6. Only equipment listed on page 6 can be invoiced by an hourly or daily rate. Pricing Schedule for trades must be submitted on pages 7 through 24 that apply.

- |                                     |                             |
|-------------------------------------|-----------------------------|
| Contractor Owned Equipment (page 6) |                             |
| Casework (page 7)                   | Landscaping (page 16)       |
| Carpet/VCT-Tile (page 8)            | Masonry (page 17)           |
| Cleaning Services (page 9)          | Moving (page 18)            |
| Concrete (page 10)                  | Painting (page 19)          |
| Demolition Services (page 11)       | Paving (page 20)            |
| Drywall Contractor (page 12)        | Plumbing (page 21)          |
| Electrical (page 13)                | Roofing (page 22)           |
| General Contracting (page 14)       | Telecommunication (page 23) |
| HVAC/Mechanical (page 15)           | Miscellaneous (page 24)     |

13. Required documents to be included as attachments with the completed PDF fillable application.

- A. Certificate of Insurance showing Commercial General Liability Insurance with coverage limits of \$1 million per occurrence/\$2 million aggregate, statutory workers compensation coverage and \$100,000 employer's liability insurance. FCPS must be the certificate holder and named as an additional insured on the policy. Business Auto Liability Insurance includes owned, non-owned and hired vehicles. Limits of \$1 million combined bodily injury and property damage per accident.
- B. Fairfax County Business, Professional and Occupational License (BPOL). **All Contractors** must obtain the Fairfax County BPOL. Businesses that provide only cleaning and moving services that do not have an office location in Fairfax County are not required to obtain the Fairfax County BPOL. These businesses that provide only cleaning and moving services must obtain proper licensing in the jurisdiction in which their offices are located.
- C. Federal Tax ID Number with completed W-9 Form <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

**ALL WORK SHALL COMPLY WITH CURRENT CODE ISSUE AND THE CURRENT FCPS MASTER SPECIFICATIONS AND DETAILS** available for your review at:

[www.fcps.edu](http://www.fcps.edu) and search for **Master Specifications and Details**

**INVOICE PROCEDURE:**

Submit a legible, 8 1/2" x 11" formatted invoice (no hand-written invoice) to the Office of Design and Construction referencing the work order number associated to the particular job and accompanied by job tickets, which shall include name of technicians that worked the project, the date, and the number of productive hours worked. Submit **ONE** copy of each supplier invoices with detailed description of items based on actual cost with mark-up equal to the percentage offered, copies of all sub-contractor billing and any stock material to be billed as such with item description and price of each. **Markup on materials shall only be for the material. Sale tax paid will be reimbursed as a separate line on the invoice.** Labor rates shall be paid on basis of productive time on the job site.

Design and Construction Services  
Attention: Facilities Construction Manager  
8115 Gatehouse Road, Suite 3400  
Falls Church, VA 22042  
Telephone: 571-423-2200

**BY SIGNING AND SUBMITTING THIS APPLICATION, CONTRACTOR HAS READ AND AGREES TO COMPLY WITH THE CURRENT FCPS MASTER SPECIFICATIONS AND GENERAL CONDITIONS SECTION 00700, ON ALL PROJECTS AWARDED, HOURLY RATES SUBMITTED, AND TO THE INVOICING PROCEDURE. MASTER SPECIFICATION CAN BE LOCATED ON FCPS WEBSITE, [WWW.FCPS.EDU](http://WWW.FCPS.EDU) SEARCH FOR MASTER SPECIFICATIONS.**

_____	_____
Print Name	Title
_____	_____
Electronic Signature	Date

(For electronic signature instructions, please click above the electronic signature line to either create a new signature or to insert an existing signature).

Questions about this *Contractor Application Form for Facilities Modification Projects* may be directed to:

Keith Kessler, VCO, Buyer II or  
Sharon Kropp, CPPB, Senior Buyer  
Fairfax County Public Schools  
Design and Construction Services  
8115 Gatehouse Road, Suite 3500  
Falls Church, VA 22042  
Telephone Number 571-423-2262 or 571-423-2414  
Email: [facilitiesimprovements@fcps.edu](mailto:facilitiesimprovements@fcps.edu)

**PRICING SCHEDULE FORM**

**CONTRACTOR OWNED EQUIPMENT PER BELOW LIST ONLY**

**HOURLY RATES:**

Dump Truck	\$ _____	per hour
Bucket Truck	\$ _____	per hour
Mini Excavator	\$ _____	per hour
Skid Steer Loader	\$ _____	per hour
Backhoe/Loader	\$ _____	per hour
Asphalt Roller	\$ _____	per hour
Asphalt Paver	\$ _____	per hour
Forklift	\$ _____	per hour
Large Air Compressor	\$ _____	per hour
Electric Jack Hammer	\$ _____	per hour
Scissor Lift	\$ _____	per hour
Crane	\$ _____	per hour

**DAILY RATES:**

Dump Truck	\$ _____	per day
Bucket Truck	\$ _____	per day
Mini Excavator	\$ _____	per day
Skid Steer Loader	\$ _____	per day
Backhoe/Loader	\$ _____	per day
Asphalt Roller	\$ _____	per day
Asphalt Paver	\$ _____	per day
Forklift	\$ _____	per day
Large Air Compressor	\$ _____	per day
Electric Jack Hammer	\$ _____	per day
Scissor Lift	\$ _____	per day
Crane	\$ _____	per day

Rates specified by the Contractor shall include all direct and indirect overhead costs, such as operators, transportation, fuel, general and administrative costs, etc.

CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: CASEWORK**

**LABOR RATES: CASEWORK**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

**Markup on materials and equipment rental shall only be for the material or rental of equipment. Sales tax paid will be reimbursed as a separate line on the invoice. Contractor Owned Equipment listed on page 6 cannot be marked up or considered equipment rental.**

Rates specified by the Contractor shall include all direct and indirect overhead costs, such as transportation, supervision, general and administrative costs, etc. Labor and material rates will be paid on the basis of productive time at the job site. Regular hours are 7:30 a.m. through 4:00 p.m., Monday through Friday. Overtime hours are defined as Monday through Friday, 4:00 p.m. to 7:30 a.m., weekends and county holidays. However, pre-arranged night shift work is to be billed at regular rates. All work hours shall be scheduled on job by job basis with the construction manager.

Labor rates will be paid on the basis of time at the job site. Time spent for transportation of workers, material acquisition, handling, delivery or movement of contractor owned by rental equipment, and project supervision shall not be chargeable directly, but are to be considered overhead. These costs must be included as an hourly rate for base labor and/or material.

CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: CARPET/VCT INSTALLER**

**LABOR RATES: CARPET/VCT**

Carpet Installer, Lead	\$ _____	per hour
Carpet Installer, Helper	\$ _____	per hour
VCT Installer, Lead	\$ _____	per hour
VCT Installer, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Carpet Installer, Lead	\$ _____	per hour
Carpet Installer, Helper	\$ _____	per hour
VCT Installer, Lead	\$ _____	per hour
VCT Installer, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_



**PRICING SCHEDULE FORM**

**TRADE: CLEANING SERVICES**

**LABOR RATES: CLEANING**

Supervisor	\$ _____	per hour
Cleaner, Lead	\$ _____	per hour
Cleaner, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Supervisor	\$ _____	per hour
Cleaner, Lead	\$ _____	per hour
Cleaner, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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BUSINESS NAME: \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: CONCRETE CONTRACTOR**

**LABOR RATES: CONCRETE CONTRACTOR**

Superintendent	\$ _____	per hour
Concrete, Lead	\$ _____	per hour
Concrete, Helper	\$ _____	per hour
Equipment Operator	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Concrete, Lead	\$ _____	per hour
Concrete, Helper	\$ _____	per hour
Equipment Operator	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: DEMOLITION CONTRACTOR**

**LABOR RATES: DEMOLITION CONTRACTOR**

Superintendent	\$ _____	per hour
Demolition, Lead	\$ _____	per hour
Demolition, Helper	\$ _____	per hour
Equipment Operator	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Demolition, Lead	\$ _____	per hour
Demolition, Helper	\$ _____	per hour
Equipment Operator	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

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VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: DRYWALL CONTRACTOR**

**LABOR RATES: DRYWALL CONTRACTOR**

Finisher	\$ _____	per hour
Hanger	\$ _____	per hour
Framer	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Finisher	\$ _____	per hour
Hanger	\$ _____	per hour
Framer	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
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PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: ELECTRICAL**

**LABOR RATES: ELECTRICAL**

Electrician, Lead	\$ _____	per hour
Electrician, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Electrician, Lead	\$ _____	per hour
Electrician, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: GENERAL CONTRACTOR**

**LABOR RATES: GENERAL CONTRACTOR**

Superintendent	\$ _____	per hour
Carpenter, Lead	\$ _____	per hour
Carpenter, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Carpenter, Lead	\$ _____	per hour
Carpenter, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: HVAC MECHANICAL**

**LABOR RATES: HVAC MECHANICAL**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
HVAC Service Tech	\$ _____	per hour
Controls Tech	\$ _____	per hour

**LABOR RATES, OVERTIME**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
HVAC Service Tech	\$ _____	per hour
Controls Tech	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

**Markup on materials and equipment rental shall only be for the material or rental of equipment. Sales tax paid will be reimbursed as a separate line on the invoice. Contractor Owned Equipment listed on page 6 cannot be marked up or considered equipment rental.**

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Labor rates will be paid on the basis of time at the job site. Time spent for transportation of workers, material acquisition, handling, delivery or movement of contractor owned by rental equipment, and project supervision shall not be chargeable directly, but are to be considered overhead. These costs must be included as an hourly rate for base labor and/or material.

CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: LANDSCAPING CONTRACTOR**

**LABOR RATES: LANDSCAPING CONTRACTOR**

Superintendent	\$ _____	per hour
Landscaping, Lead	\$ _____	per hour
Landscaping, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Landscaping, Lead	\$ _____	per hour
Landscaping, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_



**PRICING SCHEDULE FORM**

**TRADE: MASONRY CONTRACTOR**

**LABOR RATES: LANDSCAPING CONTRACTOR**

Superintendent	\$ _____	per hour
Lead Mason	\$ _____	per hour
Mason Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Lead Mason	\$ _____	per hour
Mason Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: MOVING**

**LABOR RATES: MOVING**

Packer, Lead	\$ _____	per hour
Packer , Helper	\$ _____	per hour
Installer, Lead	\$ _____	per hour
Installer, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Packer, Lead	\$ _____	per hour
Packer, Helper	\$ _____	per hour
Installer, Lead	\$ _____	per hour
Installer, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
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Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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BUSINESS NAME: \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: PAINTING CONTRACTOR**

**LABOR RATES: PAINTING CONTRACTOR**

Painter, Lead	\$ _____	per hour
Painter, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Painter, Lead	\$ _____	per hour
Painter, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: PAVING**

**LABOR RATES: PAVING**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Mechanic, Lead	\$ _____	per hour
Mechanic, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: PLUMBING CONTRACTOR**

**LABOR RATES: PLUMBING CONTRACTOR**

Plumber, Lead	\$ _____	per hour
Plumber, Helper	\$ _____	per hour
Pipefitter	\$ _____	per hour
Steamfitter	\$ _____	per hour

**LABOR RATES, OVERTIME**

Plumber, Lead	\$ _____	per hour
Plumber, Helper	\$ _____	per hour
Pipefitter	\$ _____	per hour
Steamfitter	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: ROOFING CONTRACTOR**

**LABOR RATES: ROOFING CONTRACTOR**

Superintendent	\$ _____	per hour
Roofer, Lead	\$ _____	per hour
Roofer, Helper	\$ _____	per hour
Sheet Metal, Lead	\$ _____	per hour
Sheet Metal, Helper	\$ _____	per hour
Mason, Lead	\$ _____	per hour
Mason, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**LABOR RATES, OVERTIME**

Superintendent	\$ _____	per hour
Roofer, Lead	\$ _____	per hour
Roofer, Helper	\$ _____	per hour
Sheet Metal, Lead	\$ _____	per hour
Sheet Metal, Helper	\$ _____	per hour
Mason, Lead	\$ _____	per hour
Mason, Helper	\$ _____	per hour
Laborer	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

**TRADE: TELECOMMUNICATION**

**LABOR RATES: TELECOMMUNICATION**

Low Voltage Wiring Technician, Lead	\$ _____	per hour
Computer/Phone Wiring Technician, Lead	\$ _____	per hour
Sound System Wiring Technician, Lead	\$ _____	per hour
Fire Alarm Wiring Technician, Lead	\$ _____	per hour
Security System Wiring Technician, Lead	\$ _____	per hour
Technician I	\$ _____	per hour

**LABOR RATES, OVERTIME**

Low Voltage Wiring Technician, Lead	\$ _____	per hour
Computer/Phone Wiring Technician, Lead	\$ _____	per hour
Sound System Wiring Technician, Lead	\$ _____	per hour
Fire Alarm Wiring Technician, Lead	\$ _____	per hour
Security System Wiring Technician, Lead	\$ _____	per hour
Technician I	\$ _____	per hour

**MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP:**

Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
Stock Items	15%	In the event of auditing, contractor must provide receipts, paid vouchers, inventory statements or any other support documents.

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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_

**PRICING SCHEDULE FORM**

<b>TRADE: MISCELLANEOUS</b>
<b>DESCRIPTION OF TRADE:</b> _____

<b>LABOR RATES</b>
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Superintendent	\$ _____	per hour
Lead	\$ _____	per hour
Helper	\$ _____	per hour
Laborer	\$ _____	per hour

<b>LABOR RATES, OVERTIME</b>
------------------------------

Superintendent	\$ _____	per hour
Lead	\$ _____	per hour
Helper	\$ _____	per hour
Laborer	\$ _____	per hour

<b>MATERIAL MARKUP, EQUIPMENT RENTAL AND SUBCONTRACTING MARKUP</b>
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Material Markup:	15%	Receipts must be provided
Equipment Rental and Subcontracting Markup	10%	Receipts must be provided
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CONTRACTOR \_\_\_\_\_

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME/TITLE \_\_\_\_\_

VIRGINIA CLASS A CONTRACTOR LICENSE NUMBER \_\_\_\_\_

VIRGINIA CLASS B CONTRACTOR LICENSE NUMBER \_\_\_\_\_



**Please refer to page one for instructions to  
submit your saved data.**